



## UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS  
UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 8500

<b>SERIAL NUMBER</b> 09/780,405	<b>FILING DATE</b> 02/12/2001 <b>RULE</b>	<b>CLASS</b> 455	<b>GROUP ART UNIT</b> 2681	<b>ATTORNEY DOCKET NO.</b> 322-2
<b>APPLICANTS</b> Jason J. Gosior, Edmonton, AB; Colin C. Broughton, Edmonton, AB; Louis D. Garner, Edmonton, AB; Lee E. Kruszewski, Edmonton, AB; John F. Sobota, Edmonton, AB;				
<b>** CONTINUING DATA *****</b>				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 03/15/2001</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b> AB	<b>SHEETS DRAWING</b> 20	<b>TOTAL CLAIMS</b> 62  <b>INDEPENDENT CLAIMS</b> 10
<b>ADDRESS</b> 020212				
<b>TITLE</b> Multipoint short range radio frequency system				
<b>FILING FEE RECEIVED</b> 1013	<b>FEES:</b> Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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**APPLICANTS**  
 Jason J. Gosior, Edmonton, AB;  
 Colin C. Broughton, Edmonton, AB;  
 Louis D. Garner, Edmonton, AB;  
 Lee E. Kruszewski, Edmonton, AB;  
 John F. Sobota, Edmonton, AB;

**\*\* CONTINUING DATA \*\*\*\*\***

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED\*\* SMALL ENTITY \*\***  
 \*\* 03/15/2001

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	<b>STATE OR COUNTRY</b> AB	<b>SHEETS DRAWING</b> 20	<b>TOTAL CLAIMS</b> 62	<b>INDEPENDENT CLAIMS</b> 10
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Verified and Acknowledged \_\_\_\_\_  
 Examiner's Signature \_\_\_\_\_ Initials \_\_\_\_\_

**ADDRESS**  
 RODMAN & RODMAN  
 7 SOUTH BROADWAY  
 WHITE PLAINS ,NY 10601

**TITLE**  
 Multipoint short range radio frequency system

<b>FILING FEE RECEIVED</b> 1013	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees ( Filing )
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		<input type="checkbox"/> 1.18 Fees ( Issue )
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		<input type="checkbox"/> Credit